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APPLICATION NUMBER	FILING OR 371 (c) DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
10/714,079	11/14/2003	Liise-anne Pirofski	ABX-AE1 CON

1473
 FISH & NEAVE
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 50TH FLOOR
 NEW YORK, NY 10020-1105



CONFIRMATION NO. 5765

FORMALITIES LETTER



OC000000013358736

Date Mailed: 07/28/2004

NOTICE TO COMPLY WITH REQUIREMENTS FOR PATENT APPLICATIONS CONTAINING NUCLEOTIDE SEQUENCE AND/OR AMINO ACID SEQUENCE DISCLOSURES

Filing Date Granted

Applicant is given **TWO MONTHS FROM THE DATE OF THIS NOTICE** within which to file the items indicated below to avoid abandonment. Extensions of time may be obtained under the provisions of 37 CFR 1.136(a).

- A copy of the "Sequence Listing" in computer readable form has been submitted. However, the content of the computer readable form does not comply with the requirements of 37 CFR 1.822 and/or 1.823, as indicated on the attached copy of the marked -up "Raw Sequence Listing." Applicant must provide a substitute computer readable form (CRF) copy of the "Sequence Listing" and a statement that the content of the sequence listing information recorded in computer readable form is identical to the written (on paper or compact disc) sequence listing and, where applicable, includes no new matter, as required by 37 CFR 1.821(e), 1.821(f), 1.821(g), 1.825(b), or 1.825(d).

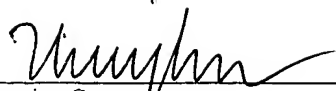
For questions regarding compliance to these requirements, please contact:

- For Rules Interpretation, call (703) 308-4216
- To Purchase PatentIn Software, call (703) 306-2600
- For PatentIn Software Program Help, call (703) 306-4119 or e-mail at patin21help@uspto.gov or patin3help@uspto.gov

Replies should be mailed to: Mail Stop Missing Parts
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*A copy of this notice **MUST** be returned with the reply.*

EV270269625US

A handwritten signature in black ink, appearing to read "Munich", is written over a horizontal line.

Customer Service Center
Initial Patent Examination Division (703) 308-1202

PART 2 - COPY TO BE RETURNED WITH RESPONSE



Attorney Docket No. ABX-AE1 CON

Applicant(s) : Liise-anne Pirofski et al.
Title : HUMAN ANTIPNEUMOCOCCAL ANTIBODIES
FROM NON-HUMAN ANIMALS
Application No. : 10/714,079 Confirmation No.: 5765
Filed Date : November 14, 2003
Group Art Unit : 1614
Examiner : Not yet assigned

Express Mail mailing label number EV270269625US

Date of Deposit August 16, 2004

I hereby certify that this paper/fee is being deposited with the United States Postal Service "EXPRESS MAIL POST OFFICE TO ADDRESSEE" service under 37 C.F.R. 1.10 on the date indicated above and is addressed to the Hon. Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, Mail Stop Missing Parts.



Claire J. Saintil-van Goodman

Enclosures:

- 1) Transmittal Letter (in dupl.);
- 2) Response to Notice to Comply with Sequence Listing Requirements;
- 3) Copy of Notice to Comply;
- 4) Paper copy of Substitute Sequence Listing;
- 5) CRF copy of Substitute Sequence Listing;
- 6) Statements in support of Substitute Sequence Listing; and
- 7) Postcard.



ABX-AE1 CON

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants : Liise-anne Pirofski et al.
Application No. : 10/714,079 Confirmation No. : 5765
Filed : November 14, 2003
For : HUMAN ANTIPNEUMOCOCCAL ANTIBODIES FROM
NON-HUMAN ANIMALS
Group Art Unit : 1614
Examiner : Not yet assigned

New York, New York
August 16, 2004

Mail Stop Missing Parts

Hon. Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

TRANSMITTAL LETTER

Sir:

Transmitted herewith: ☒ Response to Notice to Comply with Sequence Listing Requirements; ☒ Copy of Notice to Comply; ☒ paper copy of Substitute Sequence Listing (6 pp.); ☒ CRF copy of Substitute Sequence Listing; and ☒ Statements in support of Substitute Sequence Listing; to be filed in the above-identified patent application.

FEE FOR ADDITIONAL CLAIMS

☒ A fee for additional claims is not required.

☐ A fee for additional claims is required.

EV270269625US

The additional fee has been calculated as shown below:

	Claims Remaining After Amendment		Highest Number Previously Paid for		Present Extra	Rate	Fees
TOTAL CLAIMS	40	-	40*	=	0	x \$18	= \$0.00
INDEPENDENT CLAIMS	8	-	8**	=	0	x \$86	= \$0.00
FIRST PRESENTATION OF A MULTIPLE DEPENDENT CLAIM						+ \$290	= \$0.00
						TOTAL	\$0.00

* If less than 20, insert 20.

** If less than 3, insert 3.

☐ A check in the amount of \$ _____ in payment of the filing fee is transmitted herewith.

☒ The Director is hereby authorized to charge payment of any additional filing fees required under 37 C.F.R. § 1.16, in connection with the paper(s) transmitted herewith, or credit any overpayment of same, to deposit Account No. 06-1075. A duplicate copy of this transmittal letter is transmitted herewith.

☐ Please charge \$ _____ to Deposit Account No. 06-1075 in payment of the filing fee. A duplicate copy of this transmittal letter is transmitted herewith.

EXTENSION FEE

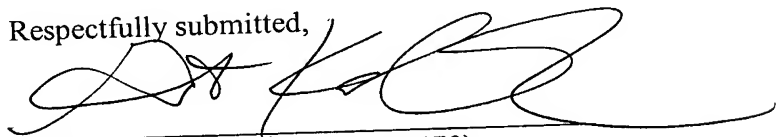
☐ The following extension is applicable to the Response filed herewith; ☐ \$110.00 extension fee for response within first month pursuant to 37 C.F.R. § 1.136(a); ☐ \$420.00 extension fee for response within second month pursuant to 37 C.F.R. § 1.136(a); ☐ 950.00 extension fee for response within third month pursuant to 37 C.F.R. § 1.136(a); ☐ \$1,480.00 extension fee for response within fourth month pursuant to 37 C.F.R. § 1.136(a); ☐ \$2,010.00 within fifth month pursuant to 37 C.F.R. § 1.136(a).

☐ A check in the amount of ☐ \$110.00; ☐ \$420.00; ☐ \$950.00; ☐ \$1,480.00;
☐ \$2,010.00 in payment of the extension fee is transmitted herewith.

☒ The Director is hereby authorized to charge payment of any additional fees required under 37 C.F.R. § 1.17 in connection with the paper(s) transmitted herewith, or to credit any overpayment of same, to Deposit Account No. 06-1075. A duplicate copy of this transmittal letter is transmitted herewith.

☐ Please charge the ☐ \$110.00; ☐ \$420.00; ☐ \$950.00; ☐ \$1,480.00; ☐ \$2,010.00; extension fee to Deposit Account No. 06-1075. A duplicate copy of this transmittal letter is transmitted herewith.

Respectfully submitted,



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